

Signed under the penalties of perjury:

Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance GLERX'S OFFICE

of Massachusetts		2073_HA	Y-1 AM 8:5	or Election Commission
Fill in Reporting Period dates: Beginning Date: 3/2	5/2023	Ending Date:	th: City or Town Cle	
Type of Report: (Check one)				
D 0/1 1 3 4 4 4 4	√1 30 day	after election		
	M 30 day	after election	year-end report	dissolution
JULIANA H. BRAZILE	20	ATHE FOR TO		224
Candidate Full Name (if applicable)	BRAZILE FOR TOWN CLERK Committee Name			
TOWN CLERK APLINGTON	POBERT BRAZILE Name of Committee Treasurer			
Office Sought and District				
56 COOLIDGE RI) APLINGTON, MA 02476	56	COOLIDGE RD	ARLINGTON	MA 02476
Residential Address E-mail:		Committee	e Mailing Address	
- Just Campite arei	E-mail:	treasurer @	brazile - n	iet
Phone # (optional):	Phone # (c	optional):		
SUMMARY BALANC	E INFO	RMATION:		
Line 1: Ending Polones from				_
Line 1: Ending Balance from previous report		10 32.35		
Line 2: Total receipts this period (page 3, line 11)		Ó		
Line 3: Subtotal (line 1 plus line 2)		1032.35		
Line 4: Total expenditures this period (page 5, line	: 14)	0		7
Line 5: Ending Balance (line 3 minus line 4)		1032.35		
Line 6: Total in-kind contributions this period (page	ge 6)	14.76		
Line 7: Total (all) outstanding liabilities (page 7)		4500.00		
Line 8: Name of bank(s) used: LEADER BAN	JK			
Affidavit of Committee Treasurer:				
I certify that I have examined this report including attached schedules and it is, to the best of activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind confinance activity of all persons acting under the authority or on behalf of this committee in activity of all persons acting under the authority or on behalf of this committee in activity of the penalties of perjury:		and liabilities for this reporting that the requirements of M.G.L	g period and represer	nts the campaign
		(Treasurer's signature	e) Date:	4/36/2023
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the b activity, of all persons acting under the authority or on behalf of this committee in accommission incurred any liabilities nor made any expenditures on my behalf during this reporting p Candidate without Committee	pest of my kno ordance with the period that are	the requirements of M.G.L. c e not otherwise disclosed in the	c. 55. I have not recei his report.	ived any contributions,
I certify that I have examined this report including attached schedules and it is, to the b finance activity, including contributions, loans, receipts, expenditures, disbursements, i campaign finance activity of all persons acting under the authority or on behalf of this contributions.				

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value		
4 5 23	ERIC HELMUTH	33 GRANDVIEW ED ARLINGTON MA 02476	WEB SITE DOMAIN REGISTRATION	14.76		
		Line 15: In-Kind Contributions over \$50 (or listed above)				
	Line 16: In-Kind Contributions \$50 & under (not listed above)					
IC : 1: 1		Line 17: TOTAL IN-KIND CO	1	14.76		

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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